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1 MAY 1981

MEMORANDUM FOR: General Counsel

FROM: Director of Central Intelligence

SUBJECT: Approval of Recommendations of Inspector General's Report on the Office of Medical Services (OMS)

1. I have approved recommendations A1 - A3 of the Inspector General's April 1981 report on the Office of Medical Services (OMS). A1 and A3 require action by you. I have attached an extract from the inspection report for your information.

2. Recommendation A1 requests that:

The DCI direct that the Deputy Director for Administration issue a policy statement in coordination with the General Counsel which updates the mission of the Office of Medical Services and spells out the medical rights and benefits of Agency employees and their dependents whether assigned abroad, to Headquarters or to other activities within the continental United States.

I have asked the DDA to take the lead in working with you on the drafting and issuance of this policy statement which will clarify what OMS should do for Agency employees.

3. Recommendation A3 requests that:

The DCI issue a policy statement to be prepared by the General Counsel in coordination with the Deputy Director for Administration and the Director of Medical Services, concerning malpractice that:

- (a) Appropriately references the Agency malpractice legislation.
- (b) Broadly defines the scope of duties for purposes of malpractice protection by Agency health personnel including but not limited to physicians, medical services officers and nurses to include all emergency, good

SECRET

Samaritan, politically expedient or operationally related acts of diagnosis, treatment and advice without regard to where or on whom such acts are performed.

- (c) Clarifies that the scope of duties recognized for purposes of malpractice does not authorize routine performance of professional services in a manner that is in conflict with an employee's job description, nor is it intended to routinely extend Agency health services to individuals not entitled to receive such services.

I ask that you take the lead on this recommendation working with the Deputy Director for Administration and the Director of Medical Services to provide malpractice protection for OMS personnel. Please submit a proposal to me not later than 20 July 1981.

/s/ B. R. Inman

WJ William J. Casey

Attachment

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OIG: dd:04/22/81

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OMS Inspection Report
Extract

As noted, the underpinnings of the OMS health program need to be clarified. It appears that the basically restricted program envisioned in PL 79-658 has been expanded by the Agency to an appreciable degree both in the United States and overseas. The CIA Act of 1949 and the DCI's special authority may cover this expansion but the extent of coverage is not clear.

An analysis of the various mission statements outlined above reveals that there is confusion about what our health support mission is. The lack of consensus as to OMS's proper mission confuses the planning process in OMS and affects innovation.

Doctors in Headquarters are not certain of the extent of their responsibilities. RMO's overseas interpret their roles differently according to their individual preferences.

Moreover, an employee would have great difficulty ascertaining what his rights and benefits were with respect to medical support. He or she recognizes that medical support overseas is more extensive; support in Headquarters is less so. But there are enough instances of personnel returning from overseas assignments who expect the same degree of medical support in Headquarters to indicate that our employees really do not know what OMS can or should do for them. There is confusion among employees assigned in the United States [REDACTED]

[REDACTED] as to medical benefits available. Also, we heard that many believe that senior level officers, solely because of their grade, receive better, more comprehensive medical care. In our opinion a high level policy statement is needed which would clearly state the mission of OMS and spell out medical rights and benefits of Agency employees and their dependents.

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